



REGIONAL PARTNERSHIP GRANTS

GRANT PERIOD: 2018–2021

JUDICIARY COURTS FOR THE STATE

LEAD AGENCY: Iowa Children's Justice

TARGET SERVICE AREA: Eastern Region of Iowa

LOCATION: Des Moines, Iowa

ADMINISTRATION FOR CHILDREN AND FAMILIES REGION: 7

CONGRESSIONAL DISTRICT SERVED: IA-02

BRIEF PROGRAM DESCRIPTION

PROGRAM DESCRIPTION: This project has created two Child and Family Assessment and Treatment Centers (CFATCs) to serve children and families in two of Iowa Department of Human Services' (IDHS) service areas in the Eastern Region of Iowa (the northern service area counties of Allamakee, Black Hawk, Bremer, Buchanan, Butler, Calhoun, Cerro Gordo, Chickasaw, Clayton, Delaware, Fayette, Floyd, Franklin, Grundy, Hamilton, Hancock, Hardin, Humboldt, Howard, Marshall, Mitchell, Pocahontas, Webster, Winnebago, Winneshiek, Worth, Wright; and the eastern service area counties of Cedar, Clinton, Dubuque, Des Moines, Henry, Jackson, Lee, Louisa, Muscatine, and Scott). The CFATCs target families and their children who are in out-of-home care or at risk for being placed out of the home due to parental substance use. Families served by the CFATCs receive enhanced assessment and case management services provided by staff who have received additional training. A key aspect of the extra training for CFATCs staff supports their work within a community collaborative committed to improved cross-systems integration. This project is also evaluating the effects on the children and families served. Specific evaluation questions explore whether parents demonstrate improved parental functioning, abstinence from substance use, and mental health status; and whether children experience improved well-being, permanency, and safety in comparison to children and families not receiving the enhanced case management and specialized services.

TARGET POPULATION: Families and their children who are in out-of-home care or at risk for being placed out of the home due to parental substance use or abuse served by CFATCs and living in IDHS's two eastern service areas.

PROJECTED NUMBERS SERVED: The program will serve 250 children over the course of the grant; 125 of them will receive treatment services and the other 125 will be part of the comparison group.

MAJOR PROGRAM GOALS

- GOAL 1:** Public and private agencies in the Eastern Region will deliver collaborative services within an integrated system of care for families with children who are in out-of-home care or at risk of being placed out of the home due to parental substance use.
- GOAL 2:** Professionals in the Eastern Region will demonstrate knowledge about the impact of prenatal or environmental exposure to substances of abuse and will be capable of making appropriate referrals to assessment and treatment for families and their children in out-of-home care or at risk of being placed out of the home due to parental substance use.

GOAL 3: Case workers in the Eastern Region will refer children in out-of-home care or at risk of being placed out of the home due to parental substance use for a full assessment of cognitive, behavioral, developmental, and mental health functioning.

GOAL 4: Comprehensive assessment of families and their children in out-of-home care or at risk of being placed out of the home due to parental substance use will result in a family treatment plan to enhance enrollment of children and families in necessary services.

GOAL 5: The health and behavioral health status of families and their children in out-of-home care or at risk of being placed out of the home due to parental substance use or abuse in the Eastern Region of Iowa will be improved through the delivery of specialized, transdisciplinary treatment services.

GOAL 6: Permanency and stability will be increased for children who are in out-of-home care or at risk of being placed out of the home due to parental substance use.

KEY PROGRAM SERVICES

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| • 4 Ps Plus [®] | • Mental Health Counseling |
| • American Society of Addiction Medicine Level of Care Assessment | • Mental Health Services |
| • Child-Parent Psychotherapy | • Psychiatric Care Including Medication Management |
| • Family Navigator (to assist family with referrals, services, and follow-up) | • Regular Regional Partnership Meetings (to discuss program, policy and management issues) |
| • Focus of the Intervention (to follow the Response to Intervention Model of Care) | • Service Linking to Early Intervention Through Iowa's Early Access (ages 0–3) |
| • Foster Parent Psychoeducation and Support From the Family Navigator | • Substance Abuse Education, Prevention, or Related Support Groups |
| • Strengthening Families Program | • Transdisciplinary Treatment Planning and Case Management Meetings |
| • IDEA Special Education (ages 3–18) | |
| • Medical/Neurological Exam | |

EXISTING OR PROPOSED PARTNERS

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|---------------------------------|--|
| • Allen Child Protection Center | • Iowa Department of Human Services |
| • Early Childhood Iowa | • Mississippi Valley Child Protection Center |
| • Iowa Department of Education | |

EVALUATION DESIGN

The grantee's local evaluation has two components: an impact study and a process study. The grantee is also participating in the Regional Partnership Grant (RPG) cross-site evaluation studies of family and child outcomes, program implementation, and collaboration among RPG grantees and partners.

IMPACT STUDY DESIGN

The grantee uses a Randomized Controlled Trial to examine the impact of its RPG services among families with children who are in out-of-home care or at risk for being placed out of the home due to parental substance use. At Child and Family Assessment and Treatment Centers (CFATCs), members of the program group receive assessments and treatment planning from a Family Navigator, early intervention and education programs for children, substance abuse treatment programs, a family strengthening and prevention program, and child-parent

psychotherapy and mental health services. Family Navigators also coordinate and follow up on all service referrals. Members of the comparison group receive assessments and treatment planning from Family Navigators at the CFATCs, and then receive business-as-usual services that currently exist in the community and a case manager through the IDHS. The impact study includes 250 families, with 125 in the program group and 125 in the comparison group. The grantee examines impacts in the following domains: permanency, safety, child well-being, family functioning, and recovery.

Data sources include administrative data and information collected by data collectors using standardized instruments. Family Navigators will administer baseline measures to all families. When the standardized instruments are administered at the follow-up periods, Family Navigators collect data from the program group families, and the evaluation team collects data from the comparison group families. Data are collected four times for each family: (1) when families begin services (at baseline, prior to randomization), (2) 6 months following baseline, (3) 12 months following baseline, and (4) 18 months following baseline.

PROCESS STUDY DESIGN

In the process study, the grantee examines the implementation of program services and progress toward project goals. The process study includes an assessment of whether program services are implemented as intended and with fidelity, the extent of systems integration and collaboration among partners, perceptions of stakeholders with regard to how well the project is achieving its goals, whether the project is reaching the intended target population, and whether that population is using the services. Data sources include observations of service implementation and planning meetings, document reviews, case file reviews for families in the program and comparison groups, and interviews with program staff and key stakeholders.

SUSTAINABILITY STRATEGIES AND ACTIVITIES

Iowa Judiciary will be able to maintain these services by actively planning for sustainability from the start of the grant period. Funds from the grant will institutionalize system reform to a more collaborative approach for working with children affected by substance abuse. Documentation of improved outcomes and individual success stories shared with the legislature, the court, and child welfare organizations will be used to inform for possible resource allocation to provide better services for families. The legislature has responded positively in the past to well-reasoned requests on children's issues. For example, the legislature allocated funds to support Family Treatment Court coordinators after the RPG 1 grant was completed to ensure that family treatment courts continue.

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